

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

JOHN S FUND

ADDRESS (number and street)

PO Box 853

☐Check if different  
than previously  
reported. (ACC)

Edwardsville

IL

62025

0853

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00390831

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☒July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mary Maxwell

Signature of Treasurer

Electronically Filed by Mary Maxwell

Date

07

25

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Small PAC work done at home.

Transaction ID :

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
JOHN S FUND

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	23171.24
(b) Cash on Hand at Beginning of Reporting Period .....	23171.24	
(c) Total Receipts (from Line 19) .....	38000.00	38000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	61171.24	61171.24
7. Total Disbursements (from Line 31) .....	27566.81	27566.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	33604.43	33604.43
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

JOHN S FUND

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4000.00	4000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4000.00	4000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	34000.00	34000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	38000.00	38000.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	38000.00	38000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	38000.00	38000.00

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	19566.81	19566.81	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	19566.81	19566.81	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	8000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ..... ➤	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	27566.81	27566.81	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27566.81	27566.81	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	38000.00	38000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	38000.00	38000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19566.81	19566.81
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19566.81	19566.81

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Michael Chappell

Mailing Address 5400 Macomb Street NW

City

Washington

State

DC

Zip Code

20016-5307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fierce, Isakowitz and Bla-  
locOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: SA11AI-668-1175-c

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael Chappell

Mailing Address 5400 Macomb Street NW

City

Washington

State

DC

Zip Code

20016-5307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fierce, Isakowitz and Bla-  
locOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	9	/	2	0	1	1

Transaction ID: SA11AI-668-1178-c

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Edward Kutler

Mailing Address 6405 Tree Top Circle

City

Columbia

State

MD

Zip Code

21045-2895

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clark and WeinstockOccupation  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	1	1

Transaction ID: SA11AI-869-1176-c

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

William Johnson

Mailing Address 1113 N Gaillard Street

City

Alexandria

State

VA

Zip Code

22304-1607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Institute of Scrap Recycl-  
ing

Occupation  
Govt Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11AI-903-1173-c

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Gregory Mesack

Mailing Address 3844 26th Street N

City

Arlington

State

VA

Zip Code

22207-5240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eris Group

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11AI-904-1174-c

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

4000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 23

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Abbott Laboratories Employee PAC (AEPAC)

Mailing Address 100 Abbott Park Road

City

Abbott Park

State

IL

Zip Code

60064-3502

FEC ID number of contributing  
federal political committee.

**C**

C00040279

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11C-142-1161-c

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Ameren Federal Political Action Committee (amerenfed Pac)

Mailing Address 1331 Pennsylvania Avenue NW  
Suite 550S

City

Washington

State

DC

Zip Code

20004-1710

FEC ID number of contributing  
federal political committee.

**C**

C00206136

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 1 1

Transaction ID: SA11C-663-1165-c

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

American Dental Political Action Cmte.

Mailing Address 1111 14th Street NW  
Suite 1100

City

Washington

State

DC

Zip Code

20005-5627

FEC ID number of contributing  
federal political committee.

**C**

C00000729

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11C-375-1166-c

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 23

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

American Society Of Anesthesiologists Political Action Committee

Mailing Address 520 N Northwest Highway

City

State

Zip Code

Park Ridge

IL

60068-2538

FEC ID number of contributing  
federal political committee.

**C** C00255752

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 1 1

Transaction ID: SA11C-901-1167-c

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

College of American Pathologists PAC

Mailing Address 1350 I Street NW  
Suite 590

City

State

Zip Code

Washington

DC

20005-3305

FEC ID number of contributing  
federal political committee.

**C** C00274944

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11C-138-1168-c

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Emerson Electric Co. Responsible Government Fund

Mailing Address 8000 W Florissant Avenue  
# 2310

City

State

Zip Code

Saint Louis

MO

63136-1414

FEC ID number of contributing  
federal political committee.

**C** C00080515

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

Transaction ID: SA11C-902-1171-c

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 23

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

General Electric Company Political Action Committee

Mailing Address 1299 Pennsylvania Avenue NW  
Suite 900W

City State Zip Code  
Washington DC 20004-2400

FEC ID number of contributing  
federal political committee. **C** C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11C-380-1164-c

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

KOCHPAC

Mailing Address 600 14th Street NW  
Suite 800

City State Zip Code  
Washington DC 20005-2099

FEC ID number of contributing  
federal political committee. **C** C00236489

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11C-316-1163-c

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Merck Employees PAC (Merck PAC)

Mailing Address 601 Pennsylvania Avenue NW

City State Zip Code  
Washington DC 20004-2601

FEC ID number of contributing  
federal political committee. **C** C00097485

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11C-125-1170-c

Amount of Each Receipt this Period

1500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 23

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Merck Employees PAC (Merck PAC)

Mailing Address 601 Pennsylvania Avenue NW

City

Washington

State

DC

Zip Code

20004-2601

FEC ID number of contributing  
federal political committee.

**C**

C00097485

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11C-125-1160-c

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Microsoft Corporation Political Action Committee

Mailing Address 16011 NE 36th Way  
# 97017

City

Redmond

State

WA

Zip Code

98052-6301

FEC ID number of contributing  
federal political committee.

**C**

C00227546

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 1 1

Transaction ID: SA11C-738-1177-c

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Pfizer PAC

Mailing Address 235 E 42nd Street

City

New York

State

NY

Zip Code

10017-5703

FEC ID number of contributing  
federal political committee.

**C**

C00016683

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: SA11C-136-1172-c

Amount of Each Receipt this Period

2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 23

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Political Action Committee Of The American Association Of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue NE  
Floor 1

City State Zip Code  
Washington DC 20002-5769

FEC ID number of contributing  
federal political committee.

**C** C00343137

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11C-689-1169-c

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

UPSPAC

Mailing Address 55 Glenlake Parkway NE

City State Zip Code  
Atlanta GA 30328-3474

FEC ID number of contributing  
federal political committee.

**C** C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11C-354-1162-c

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

34000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ACLI Services Inc</p> <p>Mailing Address 101 Constitution Avenue NW Suite 800</p> <p>City Washington State DC Zip Code 20001-2133</p> <p>Purpose of Disbursement Catering Deposit for PAC Fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-908-1193-e <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 0 / 2 0 1 1</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>5000.00</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 3635 Ruffin Road Floor 3</p> <p>City San Diego State CA Zip Code 92123-1880</p> <p>Purpose of Disbursement PAC FEC Reporting Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-1181-e <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 7 / 2 0 1 1</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>230.00</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <p>Mailing Address 3635 Ruffin Road Floor 3</p> <p>City San Diego State CA Zip Code 92123-1880</p> <p>Purpose of Disbursement PAC Reporting Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-261-1184-e <b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 1 1</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>230.00</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**5460.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)  
CompleteCampaigns.com

Mailing Address 3635 Ruffin Road  
Floor 3

City San Diego State CA Zip Code 92123-1880

Purpose of Disbursement  
PAC Reporting Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-261-1189-e  
Date of Disbursement

03 / 21 / 2011

Amount of Each Disbursement this Period

230.00

B.

Full Name (Last, First, Middle Initial)  
CompleteCampaigns.com

Mailing Address 3635 Ruffin Road  
Floor 3

City San Diego State CA Zip Code 92123-1880

Purpose of Disbursement  
PAC Reporting Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-261-1192-e  
Date of Disbursement

04 / 20 / 2011

Amount of Each Disbursement this Period

230.00

C.

Full Name (Last, First, Middle Initial)  
CompleteCampaigns.com

Mailing Address 3635 Ruffin Road  
Floor 3

City San Diego State CA Zip Code 92123-1880

Purpose of Disbursement  
PAC FEC Reporting Software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-261-1196-e  
Date of Disbursement

05 / 25 / 2011

Amount of Each Disbursement this Period

230.00

SUBTOTAL of Disbursements This Page (optional) .....

690.00

TOTAL This Period (last page this line number only) .....

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
JOHN S FUND

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Gansevoort Hotel	<b>Transaction ID:</b> SB21B-914-89-V <b>Date of Disbursement</b>																				
Mailing Address 2377 Collins Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	1	1												
City State Zip Code Miami Beach FL 33139-1609	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Lodging Expenses for PAC Fundraising Event Candidate Name	<table border="1"> <tr> <td colspan="10">7336.25</td> </tr> </table>	7336.25																			
7336.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Gula Gr- aham Group ( 01/03/11 )																				
<b>B.</b> Full Name (Last, First, Middle Initial) Gula Graham Group	<b>Transaction ID:</b> SB21B-761-1183-e <b>Date of Disbursement</b>																				
Mailing Address 700 12th Street NW Suite 700	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	1	1												
City State Zip Code Washington DC 20005-4052	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising: PAC Fundraising Commision Candidate Name	<table border="1"> <tr> <td colspan="10">1140.00</td> </tr> </table>	1140.00																			
1140.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Gula Gr- aham Group ( 01/03/11 )																				
<b>C.</b> Full Name (Last, First, Middle Initial) Solage Calistoga Hotel	<b>Transaction ID:</b> SB21B-905-84-V <b>Date of Disbursement</b>																				
Mailing Address 755 Silverado Trail	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	1	1												
City State Zip Code Calistoga CA 94515-1100	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Deposit for PAC Fundraising Event Candidate Name	<table border="1"> <tr> <td colspan="10">1500.75</td> </tr> </table>	1500.75																			
1500.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Gula Gr- aham Group ( 03/04/11 )																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1140.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)

Gula Graham Group

Mailing Address 700 12th Street NW  
Suite 700

City Washington State DC Zip Code 20005-4052

Purpose of Disbursement  
Fundraising: PAC Fundraising Expenses

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-761-1187-e

Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

1500.75

**B.**

Full Name (Last, First, Middle Initial)

Gula Graham Group

Mailing Address 700 12th Street NW  
Suite 700

City Washington State DC Zip Code 20005-4052

Purpose of Disbursement  
Fundraising: PAC Fundraising Expenses

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-761-1198-e

Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

1340.28

**C.**

Full Name (Last, First, Middle Initial)

Napa Valley Tours

Mailing Address

City Napa State CA Zip Code 94558

Purpose of Disbursement  
Buses for PAC Fundraising Event

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-912-86-V

Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

859.23

**[MEMO ITEM]**

Subitemization of Gula Gr-  
aham Group ( 06/06/11 )

**SUBTOTAL** of Disbursements This Page (optional) .....

2841.03

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Levy Catering	<b>Transaction ID:</b> SB21B-635-85-V <b>Date of Disbursement</b>																				
Mailing Address Verizon Center	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	6		2	0	1	1												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising: Catering for PAC Fundraiser	<table border="1"> <tr> <td>481.05</td> </tr> </table>	481.05																			
481.05																					
Candidate Name	<table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type	003																			
003																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Gula Gr- aham Group ( 06/06/11 )																				
<b>B.</b> Full Name (Last, First, Middle Initial) MB Maxwell Consulting Inc.	<b>Transaction ID:</b> SB21B-696-1180-e <b>Date of Disbursement</b>																				
Mailing Address 5 Stonehill Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	1	1												
City Edwardsville State IL Zip Code 62025-6764	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Retainer for PAC Finances and Reporting	<table border="1"> <tr> <td>225.00</td> </tr> </table>	225.00																			
225.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) MB Maxwell Consulting Inc.	<b>Transaction ID:</b> SB21B-696-1182-e <b>Date of Disbursement</b>																				
Mailing Address 5 Stonehill Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	8		2	0	1	1												
City Edwardsville State IL Zip Code 62025-6764	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Retainer for PAC Finances and Reporting	<table border="1"> <tr> <td>225.00</td> </tr> </table>	225.00																			
225.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**450.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

<b>A.</b> Full Name (Last, First, Middle Initial) MB Maxwell Consulting Inc.	<b>Transaction ID:</b> SB21B-696-1185-e <b>Date of Disbursement</b>																				
Mailing Address 5 Stonehill Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	3		2	0	1	1												
City Edwardsville State IL Zip Code 62025-6764	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Retainer for PAC Finances and Reporting Candidate Name	<table border="1"> <tr> <td colspan="10">225.00</td> </tr> </table>	225.00																			
225.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) MB Maxwell Consulting Inc.	<b>Transaction ID:</b> SB21B-696-1191-e <b>Date of Disbursement</b>																				
Mailing Address 5 Stonehill Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	4		2	0	1	1												
City Edwardsville State IL Zip Code 62025-6764	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Retainer for PAC Finances and Reporting Candidate Name	<table border="1"> <tr> <td colspan="10">225.00</td> </tr> </table>	225.00																			
225.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) MB Maxwell Consulting Inc.	<b>Transaction ID:</b> SB21B-696-1194-e <b>Date of Disbursement</b>																				
Mailing Address 5 Stonehill Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	7		2	0	1	1												
City Edwardsville State IL Zip Code 62025-6764	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Retainer for PAC Finances and Reporting Candidate Name	<table border="1"> <tr> <td colspan="10">225.00</td> </tr> </table>	225.00																			
225.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**675.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

JOHN S FUND

A.

Full Name (Last, First, Middle Initial)

MB Maxwell Consulting Inc.

Mailing Address 5 Stonehill Court

City  
Edwardsville

State  
IL

Zip Code  
62025-6764

Purpose of Disbursement  
Retainer for PAC Finances and Reporting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-696-1197-e

Date of Disbursement

05 / 31 / 2011

Amount of Each Disbursement this Period

225.00

SUBTOTAL of Disbursements This Page (optional) .....

225.00

TOTAL This Period (last page this line number only) .....

19566.81

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

**A.**

Full Name (Last, First, Middle Initial)  
Jane Corwin For Congress Committee Inc

Mailing Address PO Box 15385

City Rochester State NY Zip Code 14615-0385

Purpose of Disbursement  
Political Contribution: Contribution

Candidate Name  
Jane Corwin

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: NY District: 26  
Disbursement For: 2011  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Special

Transaction ID: SB23-911-1195-e  
Date of Disbursement

05 / 17 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement  
Political Contribution: Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23-39-1186-e  
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Rehberg For Congress

Mailing Address PO Box 1597

City Helena State MT Zip Code 59624-1597

Purpose of Disbursement  
Political Contribution: Contribution

Candidate Name  
Dennis R Rehberg

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: MT District:  
Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23-907-1190-e  
Date of Disbursement

03 / 29 / 2011

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
JOHN S FUND

A.

Full Name (Last, First, Middle Initial)

Steve Chabot for Congress

Mailing Address 3339 Harrison Avenue

City  
Cincinnati

State  
OH

Zip Code  
45211-5500

Purpose of Disbursement  
Political Contribution: Contribution

Candidate Name  
Steve Chabot

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 01

Transaction ID: SB23-244-1188-e

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2011

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

8000.00